

#09837102

Application or Docket Number

Fig 18.37 E2
13406 34501

(Column 1) _____ (Column 2) _____

| | | |
|---|---------------|--------------|
| TOTAL CLAIMS | 17 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 17 minus 20 = | |
| INDEPENDENT CLAIMS | 5 minus 3 = | 2 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

SMALL ENTITY
TYPE ☐

| RATE | FEE | | RATE | FEE |
|-----------|--------|----|-----------|--------|
| BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 |
| X\$ 9= | | OR | X\$18= | |
| X40= | | OR | X80= | 160 |
| +135= | | OR | +270= | |
| TOTAL | | OR | TOTAL | 870 |

| (Column 1) | (Column 2) | (Column 3) |
|------------|------------|------------|
|------------|------------|------------|

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA | | |
|--|----------------------------------|----|------------------------------------|-----|---------------|---|---|
| | | | | | | | |
| Total | • | 20 | Minus | • | 17 | • | 3 |
| Independent | • | 4 | Minus | ••• | 5 | • | 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | |

SMALL ENTITY

| RATE | ADDITIONAL FEE |
|---------------------|----------------|
| X\$ 9= | |
| X40= | |
| +136= | |
| TOTAL ADDIT. FEE | |

OR

| RATE | ADDITIONAL FEE |
|---------------------|----------------|
| X\$18= | 54 |
| X80= | |
| +270= | |
| TOTAL ADDIT. FEE | 54 |

6/21/05

| 7/21/03 (Column 1) | | (Column 2) | | (Column 3) |
|---|------|---|------|------------------|
| CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
| Total | • 20 | Minus | • 20 | • — |
| Independent | • 3 | Minus | • 4 | • — |

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM — ☐

| RATE | ADDITIONAL FEE | | RATE | ADDITIONAL FEE |
|-------------------------|----------------|----|-------------------------|----------------|
| X\$ 9= | _____ | OR | X\$18= | _____ |
| X40= | _____ | OR | X80= | _____ |
| +135= | _____ | OR | +270= | _____ |
| TOTAL ADDITIONAL FEE | _____ | OR | TOTAL ADDITIONAL FEE | _____ |

| AMENDMENT C | (Column 1) | | (Column 2) | | (Column 3) |
|---|---|-------|---|--|------------------|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | | PRESENT EXTRA |
| Total | • 20 | Minus | • 20 | | • |
| Independent | • 4 | Minus | • 5 | | • |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | | | |

| RATE | ADDITIONAL FEE | OR | RATE | ADDITIONAL FEE |
|---------------------|----------------|----|---------------------|----------------|
| XS 9= | | OR | XS18= | |
| X40= | | OR | X80= | |
| +135= | | OR | +270= | |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.